NAME OF COMMITTEE (In Full)

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 271 OF 272 FOR LINE 24 OF FORM 3X						
FEC IDENTIFICATION NUMBER ▼						
C C00540898						
/ D = D / Y = Y = Y						
of Public Distribution/Dissemination						
05 / 20 / Y Y Y Y Y						
ınt						
111469.16						
oction ID : SE.259817 of Disbursement or Obligation						
05 21 7 2014						
nt: House District: 00						
ent X Senate State: MS						
nt For: X Primary General						
Other (specify)						
of Public Distribution/Dissemination						
05 / 23 / 2014						
ınt						
56044.58						
action ID : SE.259828 of Disbursement or Obligation						
05 22 7 2014						
nt: House District: 00						
ent Senate State: MS						
nt For: X Primary General						
Other (specify)						

TEA PARTY PATRIOTS CITI		C C0054089	98			
Check if 24-hour report 48-hour report New report Amends report filed on						
Full Name of Payee				Date of Public Distribution/Dissemination		
VICTORY MEDIA GROUP				05 / 20 / Y Y Y Y Y		
Mailing Address 1701 EAST LAKE AVE.				Amount		
STE. 335	State	Zip Code	— г		111469.16	
GLENVIEW	IL 60025			Transaction ID : SE.259817 Date of Disbursement or Obligation		
Purpose of Expenditure DIRECT MAIL PRODUCTION		Category/ Type 001		05 / 21	2014	
Name of Federal Candidate		Support	Office So	ought: House	District: 00	
THAD COCHRAN		X Oppose		esident X Senate		
Calendar Year-To-Date Per Election for Office Sought		522584.22	Disburser 2014	ment For: Prim	nary General	
Full Name of Payee				Other (specify) ▶	tion /Discounting tion	
VICTORY MEDIA GROUP			Di	ate of Public Distribution 05 / Date of Public Distribution 05 / Date of Date	tion/Dissemination / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1701 EAST LAKE AVE			Aı	mount		
STE. 335 City	State	Zip Code	— г		56044.58	
GLENVIEW	IL	60025		Insaction ID : SE.259 ate of Disbursement	9828	
Purpose of Expenditure DIRECT MAIL PRODUCTION		Category/ Type 001		05 / D D D 22	/ 2014	
Name of Federal Candidate		Support	Office So	ought: House	District: 00	
THAD COCHRAN		Oppose	Pre	esident X Senate	e State: MS	
Calendar Year-To-Date Per Election for Office Sought		608272.80	Disburse 2014	ment For: X Prin	nary General	
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
MR. PAUL A KILGORE	[Electron	ically Filed] Date	M M M	/ DID / Y	y y y y 2014	
Signature						